

RECEIVED
CENTRAL FAX CENTER

MAR 17 2006

TELECOPIER TRANSMISSION

TO: USPTO FAX NO.: (571) 273-8300
FROM: James V. Costigan
TOTAL NO. OF PAGES INCLUDING THIS COVER SHEET: 3
DATE: March 17, 2006 CHARGE: 163-682
RE: 10/538,317

(IF THERE ARE ANY PROBLEMS REGARDING THIS TRANSMISSION,
PLEASE CALL (212) 302-8989, EXT. 40 OR 41)

CONFIDENTIAL

THE INFORMATION CONTAINED IN THIS FACSIMILE IS CONFIDENTIAL AND MAY BE SUBJECT
TO THE ATTORNEY-CLIENT PRIVILEGE OR ATTORNEY WORK PRODUCT EXCLUSION.

THIS FACSIMILE IS ONLY INTENDED FOR THE DESIGNATED RECIPIENT(S). ANY RECIPIENT OTHER
THAN THE DESIGNATED RECIPIENT(S) IS HEREBY NOTIFIED THAT ANY DISCLOSURE OR USE OF THE
INFORMATION IS UNAUTHORIZED AND PROHIBITED. IF YOU HAVE RECEIVED THIS FACSIMILE IN
ERROR, PLEASE NOTIFY: HEDMAN & COSTIGAN, P.C. BY TELEPHONE AT (212) 302-8989

REMARKS: ☐ Urgent ☐ For Your Review/Comments ☐ Reply ASAP ☐ FYI
☐ Per Your Request Original ☐ will / ☐ will not follow
Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the United
States Patent & Trademark Office, Fax No. 703-273-8300 on March 17, 2006.

James V. Costigan

RECEIVED
CENTRAL FAX CENTER

MAR 17 2006

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/81 (01-06)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/538,317
Filing Date	November 1, 2005
First Named Inventor	Emilio Vitale
Title	HYBRID DRIVE ASSEMBLY FOR A VEHIC.
Art Unit	3682
Examiner Name	
Attorney Docket Number	163-682

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

47888

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Prof. Marco Pasquali</i>	Date	March 14, 2006
Name	Prof. Marco Pasquali	Telephone	
Title and Company	UNIVERSITA' DI PISA		

NOTE: Signatures of all the inventors or assignees of record of the entire interest, or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of TWO forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/538,317
Filing Date	November 1, 2005
First Named Inventor	Emilio Vitale
Title	HYBRID DRIVE ASSEMBLY FOR A VEHIC.
Art Unit	3682
Examiner Name	
Attorney Docket Number	163-682

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number;
OR

47888

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number;
OR

☐ The address associated with Customer Number:

☐ Firm or
Individual Name

Address

City

Country

Telephone

State

Zip

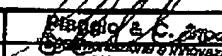
Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	March 14, 2006
Name	MAURIZIO MARGACCI	Telephone	
Title and Company	PIAGGIO & C. S.p.A.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of TWO forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.